

CLAIMS ONLY						Application Number	Filing Date	
						101810452		
						Applicant(s)		
* May be used for additional claims or amendments								
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			
	Indep	Depend	Indep	Depend	Indep	Depend		
1	1							
2	1							
3	1							
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49								
50								
Total Indep	2							
Total Depend	27							
Total Claims	29							